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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)							
	Lujan, Ben, R, Mr.,		: K = alal==	h a a c :!		0 Candid-t-1- 550	I al a m 4) f) = - 4) 4	ll um b o u
	(b) Address (number and street) 05 Entrada Celedon Y Nestora	☐ Check if address changed			Candidate's FEC Identification Number     H8NM03196			
	(c) City, State, and ZIP Code				_	3. Is This	New	Amended
_	Santa Fe		NM	87506		Statement <b>X</b>	(N) OR	(A)
4.	Party Affiliation DEMOCRATIC PARTY	5. Office Sought House			6. State & Distr	rict of Candidate 03		
	DEMOCRATIO FARTT	110000			14141			
	DE	SIGNATION (	OF PRINC	CIPAL	CAMPAIGN	N COMMITTEE		
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)							
	NOTE: This designation should be f	iled with the approp	riate office li	sted in th	ne instructions.			
	(a) Name of Committee (in full)							
	People for Ben							
	(b) Address (number and street) PO Box 31129							
	(c) City, State, and ZIP Code							
					NM	87594		
	Santa Fe				INIVI	07394		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES  (Including Joint Fundraising Representatives)  8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.								
	NOTE: This designation should be f	iled with the principa	al campaign	committe	e.			
_	(a) Name of Committee (in full)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
	I certify that I have exa	mined this Stateme	nt and to the	best of I	my knowledge a	nd belief it is true, cor	rect and comp	lete.
Si	gnature of Candidate					Date		
Lujan, Ben, R, Mr.,				[Elect	ronically Filed]	12/28/2018		
N	OTE: Submission of false, erroneous.	or incomplete infor	mation may	subject tl	ne person signin	ng this Statement to p	enalties of 2 U.	S.C. §437g.
				-	·	- '		
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FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**(Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)  Lujan Lobo Victory Fund							
	(b) Address (number and street) 910 17th st NW Suite 925							
	(c) City, State, and ZIP Code							
	Washington DC 20006							
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.  (a) Name of Committee (in full)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.  (a) Name of Committee (in full)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							